Set Name side by side	Query	Hit Count	Set Name result set
DB=USPT; PLUR=YES; OP=ADJ			
L15	L14 and (neurotoxin or botulinum toxin)	12	L15
L14	l1 and (dental or teeth)	148	L14
L13	l8 and (dental or teeth)	2	L13
L12	L8 and l1	7	L12
L11	6261572.pn.	1	L11
L10	6143306.pn.	1	L10
L9	6143306.pn.	1	L9
L8	diabetes and l4	39	L8
L7	L6 and diabetes	0	L7
L6	l4 and l2	0	L6
L5	L4 and l1	9	L5
L4	botulinum toxin	266	L4
L3	l1 and l2	43	L3
L2	tic douloureux	62	L2
L1	trigeminal neuralgia	510	L1

END OF SEARCH HISTORY

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   (FILE 'HOME' ENTERED AT 12:03:01 ON 18 NOV 2003)

     FILE 'BIOSIS, CABA, EMBASE, CAPLUS, LIFESCI, MEDLINE, SCISEARCH' ENTERED
     AT 12:03:46 ON 18 NOV 2003
L1          4875 S (BOTULINUM TOXIN A OR BOTOX A)
L2         24690 S (NEURALGIA)
L3            16 S L1 AND L2
L4            16 DUP REM L3 (0 DUPLICATES REMOVED)
L5          9414 S TRIGEMINAL NEURALGIA
L6             5 S L5 AND L1

     FILE 'BIOSIS, SCISEARCH, VETU, VETB, AGRICOLA' ENTERED AT 12:15:02 ON 18
     NOV 2003
L7          3391 S TRIGEMINAL NEURALGIA
L8             0 S L7 AND L1
L9          1275 S L7 AND TREATMENT
L10         1049 DUP REM L9 (226 DUPLICATES REMOVED)
L11          263 S L10 AND (FACIAL OR FACE OR DENTAL OR TEETH)
L12            5 S L11 AND TONGUE
L13          658 S L11 AND BOTULINUM TOXIN OR BOTOX
L14            7 S L11 AND BOTULINUM TOXIN
L15            0 S L11 AND (DIABETES OR AMYLOIDOSIS)

     FILE 'BIOSIS, SCISEARCH, VETU, VETB, AGRICOLA' ENTERED AT 12:25:10 ON 18
     NOV 2003
L16            0 S L11 AND (DIABETES OR AMYLOIDOSIS)

     FILE 'BIOSIS, LIFESCI, JAPIO, USPATFULL, EUROPATFULL, CONFSCI, MEDLINE,
     CAPLUS' ENTERED AT 12:25:33 ON 18 NOV 2003
L17            0 S L11 AND (DIABETES OR AMYLOIDOSIS)

     FILE 'BIOSIS, LIFESCI, JAPIO, USPATFULL, EUROPATFULL, CONFSCI, MEDLINE,
     CAPLUS' ENTERED AT 12:25:59 ON 18 NOV 2003
L18         6941 S TRIGEMINAL NEURALGIA
L19          536 S L18 AND DIABETES
L20          121 S L18 AND AMYLOIDOSIS
L21           11 S L19 AND BOTULINUM TOXIN
L22            2 S L20 AND BOTULINUM TOXIN
L23            0 S BORODIC, GARY/AAU
L24            4 S BORODIC, GARY/AU
L25           23 S BORODIC, GARY E/AU
L26           16 DUP REM L25 (7 DUPLICATES REMOVED)
L27            9 S L26 AND PAIN
L28            6 S L27 AND (FACIAL OR FACE)
L29            2 S L26 AND L18
L30            2 S ACQUADRO, MARTIN/AU
L31        11375 S  BOTULINUM TOXIN
L32          105 S L31 AND DIABETES
L33           11 S L32 AND TRIGEMINAL NEURALGIA
L34           22 S L31 AND (FACIAL PAIN)
L35           18 DUP REM L34 (4 DUPLICATES REMOVED)

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FILE 'BIOSIS, CABA, EMBASE, CAPLUS, LIFESCI, MEDLINE, SCISEARCH' ENTERED AT 12:51:04 ON 18 NOV 2003

L36	647	S	TIC DOULOUREUX
L37	20732	S	BOTULINUM TOXIN
L38	0	S	L36 AND L37
L39	2	S	L36 AND DIABETES
L40	0	S	L36 AND AMYLOIDOSIS
L41	290	S	L36 AND TREATMENT
L42	169	S	L41 AND PAIN
L43	0	S	L42 AND BOTOX
L44	0	S	L42 AND BOTULINUM TOXIN

L42 ANSWER 104 OF 169 MEDLINE on STN

AB In a prospective study, 50 consecutive patients, referred to a **pain treatment** unit for surgery to alleviate various forms of facial **pain**, were all given transcutaneous nerve stimulation (TNS) therapy and followed for 2 years. Of the 44 patients remaining at the 2-year follow-up review, 20 (45%) reported satisfactory analgesia from conventional or acupuncture-like TNS. The latter technique markedly improved the overall results. No serious side effects were seen. Atypical facial **pain** of known etiology responded best to **treatment**, but satisfactory relief was often produced with **tic douloureux**. Duration of the **pain** condition as well as sex of the patient were predictors of **treatment** results. It is concluded that TNS therapy represents a valid alternative to surgery when pharmacological therapy fails, especially in the elderly and in patients with atypical facial **pain**.

AN 84215390 MEDLINE

DN 84215390 PubMed ID: 6610027

TI **Pain** relief from peripheral conditioning stimulation in patients with chronic facial **pain**.

AU Eriksson M B; Sjolund B H; Sundbarg G

SO JOURNAL OF NEUROSURGERY, (1984 Jul) 61 (1) 149-55.
Journal code: 0253357. ISSN: 0022-3085.

CY United States

DT Journal; Article; (JOURNAL ARTICLE)

LA English

FS Abridged Index Medicus Journals; Priority Journals

EM 198407

ED Entered STN: 19900320
Last Updated on STN: 19900320
Entered Medline: 19840726

L42 ANSWER 48 OF 169 EMBASE COPYRIGHT 2003 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

AB We report on our experience with nerve block for **treatment** of trigeminal neuralgia. In none of the cases treated did we observe any side effects. We can fully confirm the number of successful **treatments** reported by Jenkner. According to our present experience, transcutaneous nerve block is a useful additional form of physical **treatment** for **tic douloureux** and symptomatic trigeminal neuralgia. From the point of view of health insurance costs, this has the advantage of permitting the termination of medical therapy in almost all the patients.

AN 86243805 EMBASE

DN 1986243805

TI [Trigeminal neuralgia. Possibility of treating the **pain** with transcutaneous nerve block].
TRIGEMINUSNEURALGIE. SCHMERZBEKAMPFUNG DURCH TRANSKUTANE NERVENBLOCKADE.

AU Artner F.

CS Ambulat. f. Phys. Medizin u. Rehab., Burgenlandische Gebietskrankenkasse, A-7001 Eisenstadt, Austria

SO Fortschritte der Medizin, (1986) 104/38 (711-714).
CODEN: FMDZAR

CY Germany

DT Journal

FS 008 Neurology and Neurosurgery
011 Otorhinolaryngology
024 Anesthesiology

LA German

SL English

L15 ANSWER 1 OF 3 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

AB Objectives-Oromandibular dystonia (OMD) is a focal dystonia manifested by involuntary muscle contractions producing repetitive, patterned mouth, jaw, and tongue movements. Dystonia is usually idiopathic (primary), but in some cases it follows peripheral injury. Peripherally induced cervical and limb dystonia is well recognised, and the aim of this study was to characterise peripherally induced OMD. Methods-The following inclusion criteria were used for peripherally induced OMD: (1) the onset of the dystonia was within a few days or months (up to 1 year) after the injury; (2) the trauma was well documented by the patient's history or a review of their medical and dental records; and (3) the onset of dystonia was anatomically related to the site of injury (facial and oral). Results-Twenty seven patients were identified in the database with OMD, temporally and anatomically related to prior injury or surgery. No additional precipitant other than trauma could be detected. None of the patients had any litigation pending. The mean age at onset was 50.11 (SD 14.15) (range 23-74) years and there was a 2:1 female preponderance. Mean latency between the initial trauma and the onset of OMD was 65 days (range 1 day-1 year). Ten (37%) patients had some evidence of predisposing factors such as family history of movement disorders, prior exposure to neuroleptic drugs, and associated dystonia affecting other regions or essential tremor. When compared with 21 patients with primary OMD, there was no difference for age at onset, female preponderance, and phenomenology. The frequency of dystonic writer's cramp, spasmodic dysphonia, bruxism, essential tremor, and family history of movement disorder, however, was lower in the posttraumatic group ($p<0.05$). In both groups the response to **botulinum toxin** treatment was superior to medical therapy ($p<0.005$). Surgical intervention for temporomandibular disorders was more frequent in the post-traumatic group and was associated with worsening of dystonia. Conclusion-The study indicates that oromandibular-facial trauma, including dental procedures, may precipitate th onset of OMD, especially in predispose people. Prompt recognition and treatment may prevent further complications.

AN 1999:44577 BIOSIS
DN PREV199900044577
TI Peripherally induced oromandibular dystonia.
AU Sankhla, Charulata; Lai, Eugene C.; Jankovic, Joseph [Reprint author]
CS Movement Disord. Cin., Dep. Neurol., Baylor Coll. Med., 6550 Fannin, Suite 1801, Houston, TX 77030-3498, USA
SO Journal of Neurology Neurosurgery and Psychiatry, (Nov., 1998) Vol. 65, No. 5, pp. 722-728. print.
CODEN: JNNPAU. ISSN: 0022-3050.
DT Article
LA English
ED Entered STN: 10 Feb 1999
Last Updated on STN: 10 Feb 1999

dental procedures